

**NEW JERSEY STATE DEPARTMENT OF EDUCATION
CRIMINAL HISTORY REVIEW UNIT
APPLICANT AUTHORIZATION AND CERTIFICATION**
(Type or print in ink)

PCN _____

(1) Last Name	(2) First Name	(3) Middle Initial	(4) Social Security Number
(5) Date of Birth	(6) Sex (Circle One):	(7) Race (Circle One):	(Over for Instructions)
Month Day Year	M F	W B I A H	
(8) Street Address	(9) City	(10) State	(11) Zip
(12) Job Category (Circle One):			
01 Administrator/Supervisor	05 Teacher Aide	09 Food Service	
02 Classroom Teacher	06 Custodial/Maintenance	10 Security	
03 Educational Support Services (Certificated)	07	11 Other (Specify below)	
04 Substitute Teacher	08 Clerical/Secretarial		

DISTRICT USE ONLY				
(13) NAME OF COUNTY LOCATION	(14) COUNTY CODE	(15) NAME OF EMPLOYING DISTRICT	(16) DISTRICT CODE	
PRIVATE HANDICAPPED/NONPUBLIC EDUCATION AGENCY USE ONLY				
(17) NAME OF COUNTY LOCATION	(18) COUNTY CODE	(19) NAME OF PRIVATE SCHOOL	(20) AGENCY CODE	(21) SCHOOL CODE

I do hereby authorize the New Jersey State Department of Education, its agents and representatives, to submit fingerprint data pertaining to me to the Federal Bureau of Investigation and the New Jersey State Police Bureau of Identification for the purpose of obtaining criminal history record information as required by *N.J.S.A. 18A:6-7.1 et seq.* or *N.J. S.A. 18A:6-4.13*.

FORM "A" – (NEW EMPLOYEES OR EMPLOYEES WITH OVER 180 DAYS BREAK IN SERVICE)

I, _____ swear/affirm that I have not been convicted nor do I have any charges pending for the following crimes or offenses: any crime of the first or second degree; any crime bearing upon or involving sexual offense or child molestation; an offense involving the possession, manufacture, transportation, sale, distribution, habitual use of a controlled dangerous substance or any violation involving drug paraphernalia, including hypodermic needles; any crime involving the use of force or the threat of force to or upon a person or property including, but not limited to, robbery, aggravated assault, stalking, kidnapping, arson, manslaughter and murder, any crime of possessing weapons; a third degree crime as set forth in Chapter 20 of Title 2C (theft); recklessly endangering another person, terroristic threats, criminal restraint, luring or enticing child into motor vehicle or isolated structure; causing or risking widespread injury or damage; criminal mischief, burglary, usury, threats and other improper influence, perjury and false swearing, resisting arrest, escape; any conspiracy to commit or attempt to commit any of the crimes described in this act.

FORM "B" – (CURRENT EMPLOYEES CHANGING DISTRICTS – BREAK IN SERVICE UNDER 180 DAYS)

I, _____ swear/affirm that I have not been convicted of any crime or offense bearing upon or involving sexual offense or child molestation; endangering the welfare of children or incompetents; an offense involving the manufacture, transportation, sale, possession, habitual use of a controlled dangerous substance; any crime involving the use of force or the threat of force to or upon a person or property including robbery, aggravated assault, kidnapping, arson, manslaughter and murder, or a simple assault involving the use of force

Signature of Applicant	Telephone No.	Date	Notary
Copy Distribution:	White-Department of Education	Canary-Applicant	Pink-Submitting District/Private School
			Goldenrod-Contracted Service Provider